TRICARE

Your Military Health Plan

TriWest Healthcare Alliance

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Beneficiary Education Briefing

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What is TRICARE?

- DoD's managed health care program
- Provides health benefits and services to active duty and retired members of the uniformed services, their families, and survivors worldwide
- Available to Army, Navy, Air Force, Marine Corps, Coast Guard, the U.S. Public Health Service (USPHS), and the National Oceanic and Atmospheric Administration (NOAA)

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TRICARE's Vision

To provide a world-class health system that meets all wartime and peacetime health care needs for the active duty and retired military and their families.

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Recent Changes in TRICARE

- Transitioning to three TRICARE Regions in the 50 United States supported by three contractors that provide health care services and support
- Improving access to health care overseas
- Enhancing the retail pharmacy benefit—making it more portable and providing continuity across all TRICARE regions

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TRICARE Regions

- TRICARE North
- TRICARE South
- TRICARE West

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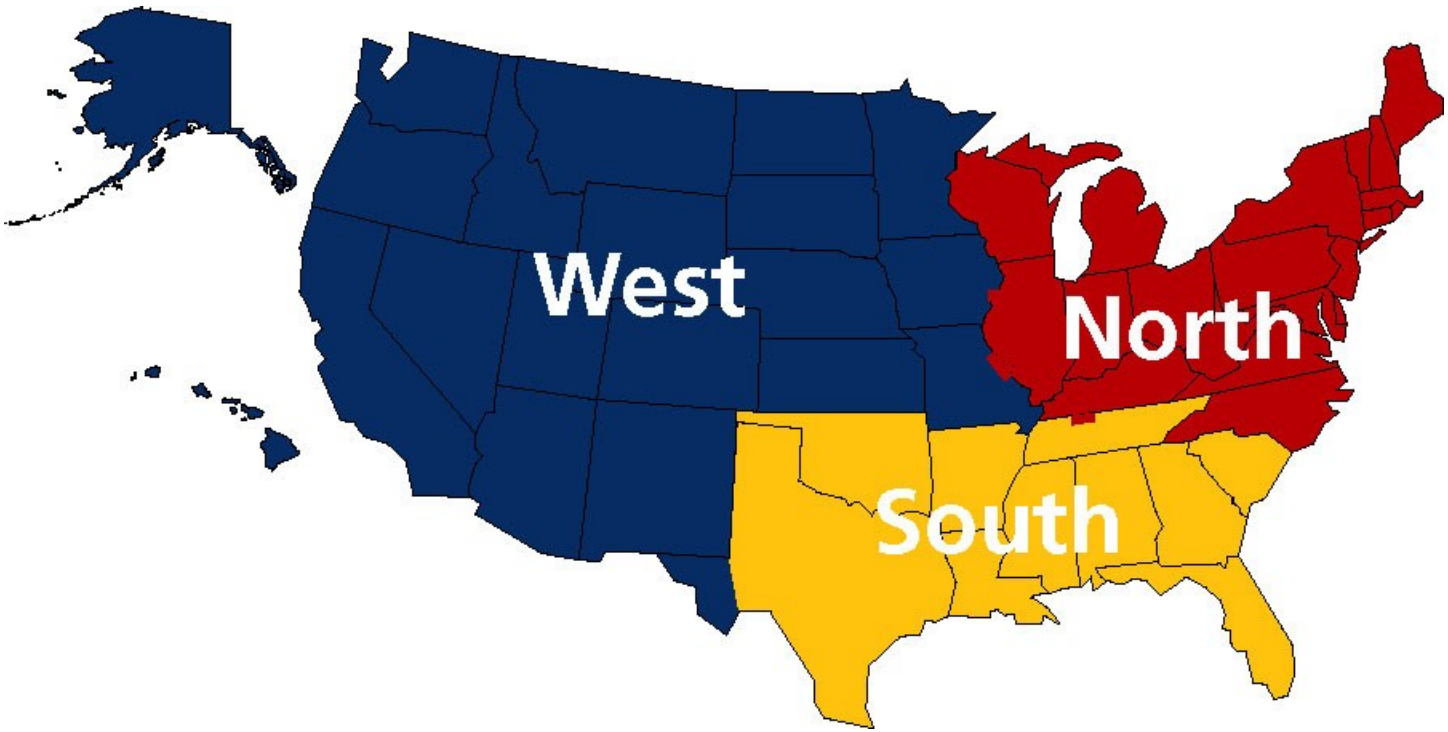
New TRICARE Regions



TRICARE West

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TRICARE Regional Contractors

- TRICARE West Region—TriWest Healthcare Alliance (TriWest)
- TRICARE North Region—Health Net Federal Services, Inc. (Health Net)
- TRICARE South Region—Humana Military Healthcare Services, Inc. (Humana Military)

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History of TriWest

- Headquartered in Phoenix, Arizona
- First awarded TRICARE contract in 1996 to support the former TRICARE Central Region
- Has supported the military with quality health care services since April 1, 1997
- Now providing health care services and support to the TRICARE West Region to more than 2.6 million TRICARE beneficiaries

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West Region Transition

- Transition to the new TRICARE West Region is phased in from June 2004 through October 2004
- Washington, Oregon, and six northern counties in Idaho—June 1, 2004
- Yuma, AZ; Alaska, California, and Hawaii— July 1, 2004
- The states in the former TRICARE Central Region—October 1, 2004

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Enhanced Retail Pharmacy Benefit

- Worldwide* on June 1, 2004
- Administered by Express Scripts, Inc.
- Offers *greater access* to pharmacies when traveling outside of the West Region
- Provides *continuity* of pharmacy benefits and a consistent application across all TRICARE regions
- Improves *quality of care* by enabling pharmacists to have complete access to prescription data

***Overseas access is limited.**

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TriWest's Claims Processing Partner

Wisconsin Physicians Service

- Effective June 1, 2004 for Oregon, Washington, and six northern counties in Idaho
- Effective July 1, 2004 for Yuma, AZ; California, Hawaii, and Alaska
- Effective October 1, 2004 for former Central Region states (AZ, CO, ID, IA, KC, KS, MN, MO, MT, ND, NE, NM, NV, SD, TX, & UT)

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Who is eligible for TRICARE?

- Active duty service members (ADSMs) and retirees of any of the seven uniformed services
- Reserve Component members on active duty for more than 30 consecutive days (under Federal orders), from any of the seven uniformed services
- Spouses of active duty, retired, and eligible Reserve Component service members

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Eligible for TRICARE

- Unmarried children (including stepchildren) up to age 21 (or 23 if full-time student)
- Past age 21—Mental/Physical incapacity
- Unmarried children remain eligible even if parents divorce or remarry

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Updating DEERS Information

- Visit an ID card issuing facility; locate one near you at *www.dmdc.osd.mil/rsl*
- Call 1-800-538-9552
- Fax changes to: 1-831-655-8317
- Mail changes to:

  Defense Manpower Data Center Support Office
  ATTN: COA
  400 Gigling Road
  Seaside, CA 93955-6771
- Make address changes online at: *www.tricare.osd.mil/DEERSAddress*

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TRICARE Standard

- Fee-for-service option
- No enrollment required
- Seek care from any TRICARE-authorized provider
- Responsible for annual deductibles and cost-shares—highest out-of-pocket expense
- May have to pay provider then file claim for reimbursement
- May seek care in an MTF on a space-available basis
- Active duty service members are not eligible for TRICARE Standard

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TRICARE Standard Costs

- Annual deductible
  - Active duty E-4 and below: $50 individual/$100 for family
  - Active duty E-5 and above: $150 individual/$300 for family
  - Retirees and families: $150 individual/$300 for family
- Cost-shares after deductible has been met
  - Active duty family members: 20 percent of allowed charges
  - Retirees and their family members: 25 percent of allowed charges
- May be responsible for up to 15 percent above the TRICARE allowable charge for services if providers do not participate in TRICARE

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Catastrophic Cap Benefit

- ADFMs using TRICARE Standard or TRICARE Prime Remote—$1,000 per fiscal year
- All other beneficiaries using TRICARE Standard (retirees, family members of retirees, survivors, former spouses) — $3,000 per fiscal year

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TRICARE Prime

- Managed care option
- Enrollment required
- Fewer out-of-pocket costs
- Assigned a primary care manager (PCM)
- Care received at MTFs
- Guaranteed access to standards
- No claims to file

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Enrolling in TRICARE Prime

- Active duty members—no enrollment fee
- Must fill out enrollment form
- Enrollment is continuous

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MTF – The First Option for Care

- TRICARE Prime beneficiaries must seek care from an MTF when it is available
- Inpatient admissions, specialty appointments, procedures requiring prior authorization
- If the service is not available at the MTF you will be referred to a TRICARE network provider first
- Check with TriWest for more information

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TRICARE Prime Remote for Active Duty Family Members

- Active duty family members (ADFMs) residing with their enrolled sponsors in this area are eligible for TPRADFM
- Must enroll in the West Region
- Family members who are enrolled in TPRADFM may remain enrolled even if the sponsor receives unaccompanied permanent change of station (PCS) orders as long they continue to reside in the same TPR location

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TPRADFM Primary Care Services

- May seek care from non-network provider if a network provider is not available
- Beneficiaries may receive primary care services without a referral or authorization
- POS option does apply to active duty family members enrolled in TPRADFM if proper authorization is not obtained

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TPRADFM Costs

- No annual deductible
- No annual enrollment fees
- No copayments, except:
  - When filling prescriptions through the TRICARE Mail Order Pharmacy, in the TRICARE Retail Pharmacy Network or at non-network pharmacies
  - For costs associated with the Program for Persons With Disabilities (if enrolled)
  - If you chose to utilize the Point of Service option

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Newborn Enrollment

- Newborns are covered under TRICARE Prime for the first 120 days after birth—*as long as one additional family member is enrolled in TRICARE Prime*
- After 120 days, if not enrolled, newborn claims will process under TRICARE Standard
- Eligibility for TRICARE Standard ends 365 days after birth for any newborn who is not properly registered in DEERS

Referrals

- TRICARE Prime beneficiaries will be referred to an MTF first when it can provide the specialty services needed. Call 1-888-TRIWEST (1-888-874-9378) for specific information about the MTFs in your TRICARE Prime service area
- Specialty care referrals will be approved for a specific length of time and number of visits
- Follow the appropriate procedure for specialty referrals to avoid responsibility for charges other than your copayments
- If you have other health insurance, you must follow the network referrals rules for that carrier

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Authorization Requirements – Active Duty Service Members

- If authorization is not obtained before a service is rendered to an ADSM
  - Claim is deferred to the Military Medical Support Office (MMSO)
  - Service Point of Contact (SPOC) may instruct WPS to deny the claim
  - "Denied Per SPOC" appears on the remittance advice
- In such cases, the ADSM is responsible for payment and can appeal the denial by submitting a request in writing to the SPOC

TPRADFM Authorization Requirements

- Authorization required for
  - Any procedure or service shown on the medical necessity review list
  - Adjunctive dental care
  - Inpatient care
  - Behavioral health services
- Failure to obtain pre-authorization will cause the claim to be denied initially
- The denial may ultimately be reversed or upheld on appeal.

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Referral and Authorization Process

TPR Active Duty Service Members

- Contact TriWest for assistance in obtaining referrals and authorizations through TriWest's toll-free number:
  - 1-888-TRIWEST (1-888-874-9378)
- All nonemergency admissions and specialty care must be pre-authorized

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Prime Travel Entitlement

- When referred for specialty care at a location more than 100 miles from your PCM, you may be eligible to have your “reasonable travel expenses” reimbursed
- Includes the actual costs incurred when traveling such as meals, gas/oil, tolls, parking, and public transportation
- Contact your MTF or the TRICARE Regional Office for more information or visit the TRICARE Web site at *www.tricare.osd.mil/primetravel*

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TRICARE Prime Point-of-Service (POS) Option

- Freedom to use any TRICARE-authorized provider
- In or out of network—no referrals needed
- Non-availability statement is not necessary
- Subject to deductibles and cost-shares
- Point-of-service option is more costly to the enrollee

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POS Cost-shares and Deductibles

- Annual outpatient deductibles are $300 for an individual and $600 for family
- 50 percent cost-shares for outpatient and inpatient claims
- Excess charges up to 15 percent above the TRICARE allowable amount
- The 50 percent cost-share continues to be applied even after the catastrophic cap has been met

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Nonemergency Health Care While Traveling

- All routine medical care should be taken care of before you depart or delayed until you return to your assigned area
- For out-of-area urgent/acute care, you must coordinate with TriWest for an authorization before seeking care if enrolled in TRICARE Prime Remote
- For out-of-area emergency care, call 911 or go to the nearest emergency room (civilian or military)

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Enrollment Portability

- Transfer TRICARE Prime enrollment from one TRICARE Region to another
  - Active duty service members and their families have unlimited transfers without a break in coverage
  - Retirees and their families may transfer twice in a single enrollment year as long as second transfer is back to the original location
- Select a new PCM in the new region
- Update your new address in DEERS

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TRICARE Pharmacy Program

- MTF Pharmacy
- TRICARE Mail Order Pharmacy
- TRICARE Retail Network Pharmacy
- Non-network Retail Pharmacy

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MTF Pharmacies

- Prescriptions may be filled at an MTF pharmacy at no charge
- If medication is in stock, it will be filled but best to call ahead
  - Up to 30-day supply for controlled substances
  - Up to 90-day supply for all other medications
- MTF pharmacies will accept written prescriptions from any TRICARE-authorized provider

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TRICARE Mail Order Pharmacy (TMOP)

- Convenient home delivery
  - Low Cost
    - Generic medication – $3 for up to a 90-day supply
    - Brand name medication – $9 for up to a 90-day supply
    - Non-formulary medication – $22 for up to a 90-day supply
    - Note: Up to a 30-day supply for controlled substances
  - Free Shipping & Handling
  - For more information:
    - Visit *www.express-scripts.com/TRICARE*
    - 1-866-DoD-TMOP (1-888-363-8667)

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TRICARE Retail Pharmacy Network

- May have prescriptions filled at a pharmacy in the TRICARE network
- Portable across all regions—no claims to file
- Generic medication—$3 per 30-day for up to a 90-day supply
- Brand name medication—$9 per 30-day for up to 90-day supply
- Non-formulary medication—$22 per 30 day for up to a 90-day supply
- Administered by Express Scripts, Inc.
- Visit *www.tricare.osd.mil/pharmacy* to locate a retail network pharmacy near you
- 1-866-DoD-TRRx (1-866-363-8779)

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Non-Network Pharmacies

- Most costly option
- TRICARE Standard deductibles and cost-shares apply
- TRICARE Prime POS option applies for TRICARE Prime beneficiaries
- May have to pay for prescription and file claim with Express Scripts for reimbursement

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Generic Drug Use Policy

- Generic drugs will be substituted for brand name when available
- Must justify medical necessity for brand name to be dispensed
- If generic equivalent drug does not exist the brand name drug will be dispensed

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Claims Processing

- Wisconsin Physicians Service (WPS) is TriWest's subcontractor for claims processing in the West Region
- If using TRICARE Prime or TRICARE Extra, your provider will file claims for you
- Beneficiaries using TRICARE Standard may be required to file their own claims
- *www.triwest.com*
- *www.tricare4u.com*–for TRICARE For Life claims

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Submitting Claims

Beneficiaries filing their own claims, should send all claims with dates of service after July 1, 2004 to:

West Region Claims

P.O. Box 77028

Madison, WI 53707-7028

TRICARE and Other Health Insurance

- TRICARE pays after all other health insurance plans except for:
  - Medicaid
  - TRICARE supplements
  - The Indian Health Service
  - Other programs/plans as identified by TMA
- Not required to obtain referrals or pre-authorization for covered services, except for adjunctive dental care, the PFPWD, and behavioral health care services

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TRICARE Information Service

- A single resource for beneficiaries
- Provides TRICARE information and refers beneficiaries to partner call centers
- Toll-free access to customer service representatives
  - 1-888-DoD-CARE (1-888-363-2273)
  - Monday-Friday (except federal holidays)
  - 8 a.m. to 8 p.m. Eastern time
  - 24 hour access to an interactive voice response system

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TRIWEST Interactive Voice Response System

- Available around the clock, 24 hours a day, seven days a week
- Route your requests and inquiries to the most appropriate customer service representative
- Will offer an automated self-service option for accessing recorded routine information
- You will speak your menu requests rather than using the telephone keypad
- You will also be able to speak with a customer service representative Mon–Fri from 8 a.m. to 6 p.m
- 1-888-TRIWEST (1-888-874-9378)

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TriWest Web Site: www.triwest.com

- Determine the status of a claim, receive information about the payment of a previously processed claim, and obtain a duplicate explanation of benefits (EOB) for claims that have been processed
- Verify your eligibility
- Out-of-pocket expense limits
- Learn about your TRICARE benefits
- Locate a network provider

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TRICARE National Resources

- TRICARE Web Site:
  www.tricare.osd.mil
- TRICARE Online:
  www.tricareonline.com
- TRICARE Information Service
  - Mon-Fri 8 a.m.–8 p.m. Eastern time
  - 1-888-DoD-CARE (1-888-363-2273)

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Important Telephone Numbers

- TriWest Healthcare Alliance
  1-888-TRIWEST (1-888-874-9378)
- TRICARE Mail Order Pharmacy
  (Express Scripts)
  1-866-DoD-TMOP (1-866-363-8667)
- TRICARE Retail Pharmacy
  (Express Scripts)
  1-866-DoD-TRRx (1-866-363-8779)

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Thank You!

- TRICARE offers comprehensive health and dental benefits for our beneficiaries
- We continue to make a strong program even better
- Wherever we maintain medical capability and capacity, whether through military or civilian services, our goal is a world-class health benefit that serves the needs of our members

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